NOV 2 9 2002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re P	atent Application of)				
Nevio	VIDOVIC, et al.) Group Art Unit: 2877				
Applica	ation No.: 10/018,220) Examiner: T. Nguyen				
Filed:	April 26, 2002) Confirmation No.: 3449				
For:	A METHOD AND A DEVICE FOR BENDING COMPENSATION IN INTENSITY-BASED FIBRE-OPTICAL MEASURING SYSTEMS	Examiner: T. Nguyen Confirmation No.: 3449 RECEIVED DEC 0 3 2002 Tanhananay Ganter 21965 RANSMITTAL LETTER				
	AMENDMENT/REPLY TI	RANSMITTAL LETTER				
	nt Commissioner for Patents gton, D.C. 20231	00				
Sir:						
En	closed is a reply for the above-identified pat	tent application.				
[]	A Petition for Extension of Time is also	enclosed.				
[]	A Terminal Disclaimer and a check for [requisite Government fee are also enclos	[] \$55.00 (2814) [] \$110.00 (1814) to cover the ed.				
[]	Also enclosed is					
[]	Small entity status is hereby claimed.					
[]	Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$370.00 (2801) [] \$740.00 (1801) fee due under 37 C.F.R. § 1.17(e).					
	[] Applicant(s) previously submitted, on, for which continued examination is requested.					
[]	Applicant(s) request suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.					
[]	A Request for Entry and Consideration of (146/246) is also enclosed.	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (146/246) is also enclosed.				
[X]	No additional claim fee is required.					

[] An additional claim fee is required, and is calculated as shown below:

	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS =		× \$18.00 (1202) =	
Independent Claims		MINUS =		× \$84.00 (1201) =	
If Amendment adds mu	ltiple depende	ent claims, add \$280	0.00 (1203)		
Total Amendment Fee					
If small entity status is o	claimed, subt	ract 50% of Total A	mendment Fe		

L	J	A claim fee in the	amount of \$	is enclosed.
[]	Charge \$	to Deposit Account N	o. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Kenneth B. Leffler

Registration No. 36,075

P.O. Box 1404

Alexandria, Virginia 22313-1404

(703) 836-6620

Date: Noul 18 29, 2002